

FY 2015 Annual Report

Illinois Medical Emergency Response Team



Summary of ASPR deliverables for FY2015
and IMERT program activities
Contract #5782150C
Federal Grant #CDC-RFA-TP12-
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PROGRAM OVERVIEW

The Illinois Medical Emergency Response Team (IMERT) is a 501c3 not for profit organization of volunteers trained to respond to disasters and provide interim medical care for survivors or evacuees. IMERT's primary mission is to assist in providing medical care when the local or regional healthcare infrastructure is overwhelmed, paralyzed or destroyed. The IMERT organization's response capabilities provide increased mitigation potential and increased medical surge response capacity within the State.

IMERT is comprised of volunteers from every region of the state. These volunteers provide the State of Illinois with a unique medical response capability of a vetted, credentialed and trained response team in support of ESF-8. Our volunteers come from the medical and emergency response community as well as the private sector. The non-medical element of the team are volunteers with special skill sets such as; information technology, communications, materials management, scene safety, and resource management. IMERT is capable of a flexible, scalable medical response. The initial medical assessment team roll-out can be accomplished in 24 hours of a deployment order.

The primary source of support for the IMERT program is a grant from the ASPR Hospital Preparedness Program #57282150C through the Illinois Department of Public Health Office of Preparedness and Response. Additional support is provided by a grant from the Department of Homeland Security through the Illinois Terrorism Task Force (ITTF). IMERT is a designated Mission Support Team (MST) with the Illinois Emergency Management Agency (IEMA). Additionally, IMERT partners with the Illinois Incident Management Team (IMT).

As a past beneficiary of the ASPR Hospital Preparedness Grant Program, IMERT has responded to numerous emergencies, disasters, and high risk/high profile events around Illinois as well as out of state. IMERT has cultivated partnerships within the health care community and with numerous agencies involved in local, regional, state and national preparedness and response. This includes participation in planning, implementation, and evaluation of exercises for hospitals, local communities, regional entities and other agencies. These efforts directly and positively impact capability in communities to support the unique medical needs caused by disaster for both responders and survivors.

IMERT physicians and staff provide education and training for health care providers and community groups within the state. Senior leadership staff has first-hand experience in response to catastrophic incidents and are capable of providing planning insights and logistics support to state agencies and Illinois communities.

IMERT promotes volunteerism throughout the state by partnering to provide education to local CERT and MRC teams and promoting additional volunteer experiences. Many team members have reported the training and experiences they receive through IMERT enhance their work in the healthcare sector and in many cases has resulted in an increased participation in both healthcare and community emergency preparedness activities. IMERT also provides skilled moulage services to response partners during full-scale exercises.

SIGNIFICANT ACTIVITIES

IMERT endeavors to provide team members with valuable training experiences that enhances our deployment capability and contributes to community resiliency around the state. Activities are planned for every geographic region and whenever possible IMERT accepts invitations from other preparedness partners to participate in their activities.

This year included a variety of preparedness activities events with regional hospital coalitions and numerous local agencies. Some highlights include:

Collaborative Ebola Plan Assessment Team



When Ebola emerged as a potential healthcare emergency in the United States IMERT assisted several hospitals with evaluation of their Ebola Response Plan by providing IMERT nurses as “actors” during walk-in drills. This allowed for a real-time evaluation of the Ebola plan and provided an opportunity for community first responders, local Public Health and hospital staff to work together on the implementation of the community strategy. These drills enabled participants to evaluate plans, work in PPE, sharpen processes and provide immediate feedback to community healthcare leaders.

Collaborative Ebola Plan Assessment Exercise, First Responders transport IMERT nurse from Ambulatory Care Center to Sarah Bush Lincoln Hospital in Charleston.

Moulage courses and implementation during community preparedness exercises

One way to enhance the realism of mass casualty exercises is to moulage actors who portray victims of the disaster. Moulage is the art of applying make-up to simulate injuries. The type of moulage depends on the exercise scenario. Each actor is given a short background story, sometimes with information on an underlying medical condition, and provided with instructions on how they should act and what they should say to the responders.

IMERT conducted moulage courses in both the northern and southern regions of the state. We also provided moulage during exercises with the National Guard in Springfield and with the Fire Department in Gurnee.



Moulaged gunshot wound at an Active Shooter drill

Telemedicine

Video communication is becoming more common in healthcare today. Providers across the country have been using various platforms to connect physicians and other healthcare providers with patients across the continuum of care. IMERT has been working at developing a video communication capability for disaster response. This encrypted technology allows us to directly convey situational awareness for our partners across the state. It also allows us to include specialist physicians and direct consultations with experts. Part of this project is specifically designed to enable Pediatric Specialists through the Illinois Emergency Medical Services for Children to engage in direct consultation with healthcare providers on scene.

There have been three successful trials of this technology so far. We have been able to contact our physicians who were hundreds of miles away. We were able to provide the State Emergency Operations Center with direct video feed from a mass casualty exercise and our Medical Director was able to see and hear patient assessments on his phone. There is tremendous potential for this technology to enhance the quality of care provided to patients during a disaster. We intend to further develop this capability.

BARRIERS and NEEDS TO ENSURE SUSTAINABILITY

The State of Illinois through IDPH and IEMA has made an investment with both grant funding and support for IMERT over the past 15 years. This backing has resulted in IMERT being able to provide medical care for thousands of citizens and training in medical disaster response to hundreds of healthcare providers and community responders.

Like every mobile response team the most essential need is continuation of adequate funding to maintain team operations. Over the past several years this funding has been decreasing though the program has managed to remain fully operational. IMERT endeavors to be a good steward of grant funds by prioritizing objectives that first focus on mobile medical capability. This includes; recruitment, retention, training, and maintenance of trucks, trailers supplies and equipment to ensure the deployment capability of a trained and self-sustainable team.

Successful implementation and sustainability of the Illinois Medical Emergency Response Team requires a dedicated staff, maintenance of the organization's infrastructure, attentive management of assets and supplies and the ability to evolve to meet future challenges.

The primary barrier for sustainability would be lack of adequate funding.

TRAINING

During this grant cycle, IMERT made a variety of training opportunities available to its volunteers, staff, and the community as a whole. Training included courses on presentations on responder mental health to MRC volunteers, FEMA preparedness training, and CBRNE and HICS education among others. A total of 4,991 hours of education were provided this grant year.

This year, IMERT was able to provide the newly formatted Deployment Operations Course for our volunteers. This face-to-face training is designed to provide members with an experience that will simulate a deployment, and allow volunteers to familiarize themselves with IMERT operations. As members are required to re-attend this course every 2 years, the course features rotating topics to improve engagement. Subject matter included; moulage, logistics, international response and pediatric

disaster response. The training was held on 8 occasions at locations around the state with 138 members participating.

IMERT's online training, which serves as an introduction for new members to IMERT policy, and procedure and a refresher course for long time members, was updated in 2015. 35 members completed this course during FY2015.

IMERT also provided "real world" training opportunities by partnering with other response agencies to allow for joint exercise participation. IMERT routinely trains with the Radiological Assessment Field Team (RAFT) and Statewide Weapons of Mass Destruction (SWMD) Team. IMERT also had the opportunity to work with the Illinois National Guard and Gurnee Fire Department on their full scale exercises and provide moulage for their training.



This map indicates locations that trainings or exercises were conducted across the state in FY 2015

RECRUITMENT

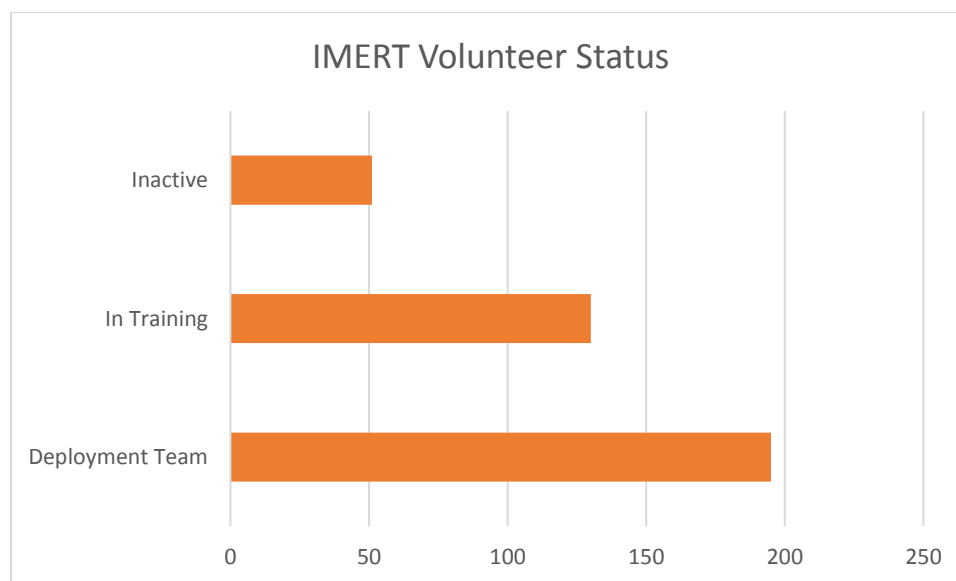
IMERT recruited and credentialed 11 new applicants this grant cycle: 5 RNs, 1 Veterinary Technician, 1 Dental Hygienist, 1 EMT-B, and 3 Mission Support Team members. Members who successfully complete the application process have had their credential information verified, completed an interview by a staff member, and have undergone a background check screening. They have also completed the state and federally required ICS 100 and 200 and NIMS 700 courses and completed one course on CBRNE/WMD response.

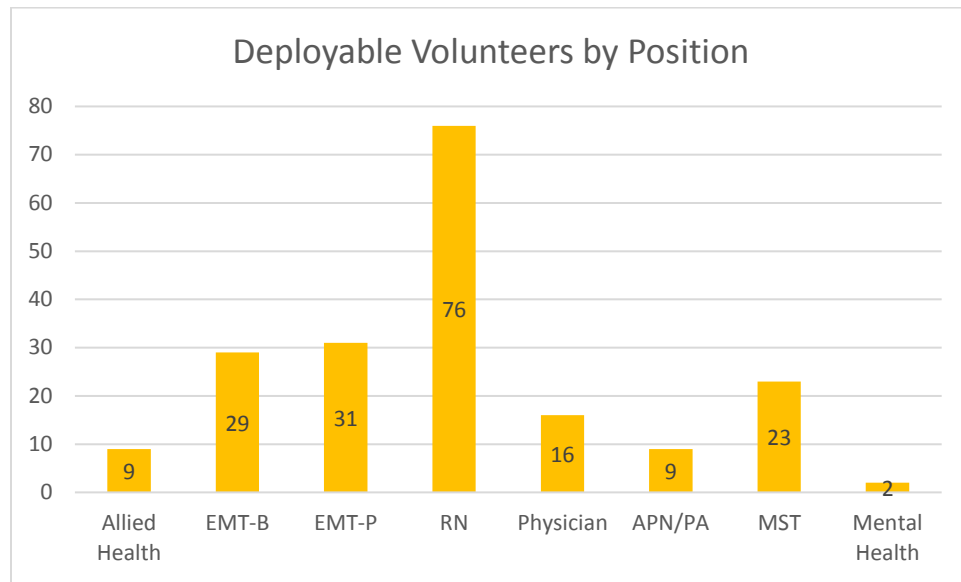
VOLUNTEER STATUS

IMERT is comprised of healthcare providers from across the patient care spectrum. The largest percentage of IMERT volunteers are registered nurses. This large nursing population allows IMERT operational sustainability during extended deployments. An important aspect of IMERT's volunteer composition is the Mission Support Team component. These team members support the medical mission by managing logistics, communications, planning and other needs.

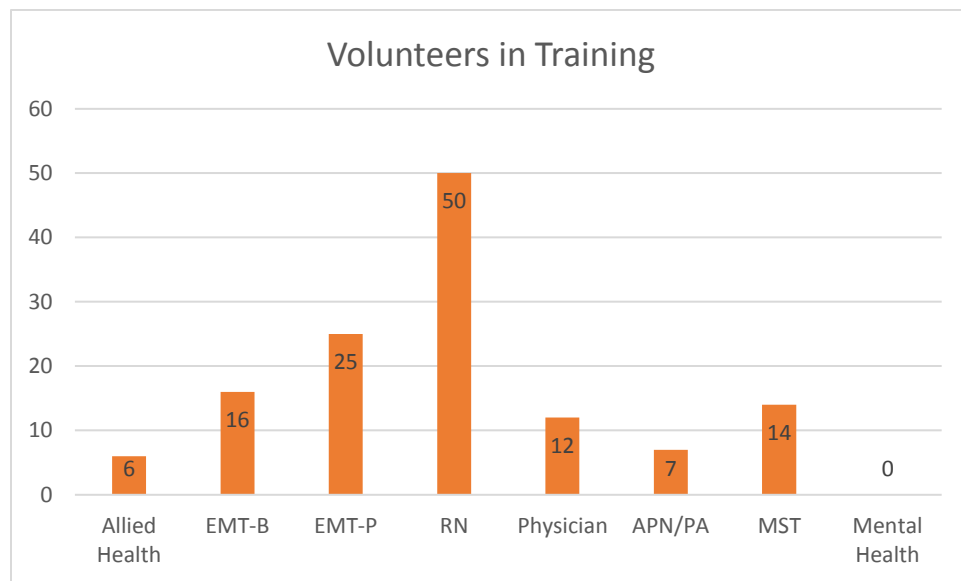
As of June 30th, 2015, IMERT has 195 deployment ready members located throughout the State of Illinois. Another 130 are in the process of completing training requirements. All deployable personnel have completed NIMS and ICS training as well as a WMD awareness course and an in-person deployment training. In FY2015 IMERT volunteers provided 1,180 hours of time to the State of Illinois.

Recruitment activities included promotion of the State's IMERT program at conferences around the State, including the Integrated Public Health and Medical Preparedness Summit and IEMA conference, and at multi-agency trainings and exercises, contributing to the state's overall preparedness.





IMERT has 130 volunteers who currently are at various stages of completing their training.



ITEMS PURCHASED IN FY2015

Assets purchased with grant funds in FY2015

Model Name	Unit Cost	Quantity
Otter Box Galaxy S4	\$29.99	1
Rubbermaid 95-Gallon Red Garbage Can w/Lock	\$228.01	1
Jetpack MIFI 6620L	\$29.99	1
Foscam FI9831W Network Cameras	\$89.99	2
Viewsonic 27" LED Monitor	\$218.96	1
Garmin Nuvi 52LM Vehicle GPS	\$94.83	4
Samsung Galaxy Tab S	\$499.99	1
Asus RT-N66R Router	\$119.99	1

Number	Deliverable	Status
2.1.1	Provide for a stable organizational infrastructure to support the ongoing operation of the Illinois Medical Emergency Response Team (IMERT) Program and ensure that necessary staff, volunteers, equipment, supplies, and commodities are readily available for health and medical disaster responses.	Status: Met Deployment capability is intact. Funding for July and August was received on 9/29. Although certain trainings and activities were curtailed, IMERT's deployment ability remained. General staff meetings and training meetings were held on 10/23/14, 11/19/14, 12/16/14, 12/22/14, 12/30/14, 1/5/2015, 1/21/15, 2/10/2015, 2/20/15, 3/9/2015, 4/13/15, 4/14/15, 4/21/15 and 6/23/15. IMERT's leadership also holds weekly operations and planning teleconferences.
2.1.1.1	Maintain good standing as a legal corporate entity and ensure funding is received and accounted for by applicable federal and state laws. Grantee certifies to the Department that it is a non-profit entity in accordance with 2CFR 230.25	Status: Met IMERT Inc. is a legal corporate entity in the state of Illinois and follows state and federal guidelines. Funding is accounted for per federal and state laws. IMERT certifies that is a non-profit entity, EIN: 27-0944660 Meetings of the IMERT Board of Directors were held on 7/25/2014, 10/29/2014, 1/14/2015, 4/8/15 and 6/25/15 At the June meeting of the Board some changes were made. Dr. Moses Lee stepped down as Chair, and will serve as President/Medical Director (non-voting). Dr. George Beranek was selected as Chair. All other Board members were re-installed for another 3 year term. The current Board of Directors: Dr. George Beranek, Chair, Dr. Bernie Heilicser Vice Chair, Dr. Dave Wold Treasurer, Marge Luczak RN MSN Secretary, Lisa Wax RN member at large.
2.1.1.2	1. Grantee will provide a written report within 30 calendar days following the end of each 3 month quarter. 2. Grantee will provide a final annual report within 30 calendar days following the termination of this agreement	1. Status: Met 2. Status: Met
2.1.1.2.1	The Grantee will maintain an inventory of equipment purchased through this grant	Status: Met

	and a listing of any other equipment that the Grantee has access to for IMERT Program operations in the Department's Inventory Management and Tracking System (IMATS).	<p>IMERT maintains an ongoing inventory of all equipment purchased and attainable assets in an internal inventory system. This inventory was not able to be imported into the IMATS this grant year. Work is currently underway to address the unique programming elements of IMATS in order to upload out current inventory. In the meantime, access to inventory information is available to IDPH at any time.</p> <p>An inventory of IDPH owned property was completed on January 27th and made available to the Department.</p>
2.1.1.3	IMERT will actively maintain a sufficient number of trained and experience staff, contractors, professional and technical services, and volunteers to provide the accounting, banking, financial, insurance, payroll, printing, communication, radio and IT, legal services and other support necessary to maintain the IMERT Program in a sustainable operational state	<p>Status: Met</p> <p><u>Full-time employees:</u> Mary Connelly, Executive Director and Elizabeth Lee, Administrative Manager</p> <p><u>Full-time staff:</u> Chris Jansen (position supported by DHS-ITTF grant through ILEAS) Planning and Logistics Chief</p> <p><u>Part-time and PRN contracted individuals include:</u> Barbara Oliff (training), Rick Steele (training) Tracy Brookshire (training) Sue Tysiak (training and recruitment).</p>
2.1.1.4	Grantee will provide safe, secure, and protective offices, storage facilities and environments for the equipment, pharmaceuticals, PPE, and other medical equipment and supplies, and response vehicles used for the IMERT Program	<p>Status: Met</p> <p>OFFICE AND EQUIPMENT: ILEAS (Illinois Law Enforcement Alarm System) in Urbana provides IMERT with safe and secure office space for response and medical equipment, and some response vehicles. The primary repository of response vehicles and deployment supplies is at a monitored warehouse space in Champaign.</p> <ul style="list-style-type: none"> • Zoll Monitors received PM maintenance on 4/16/15 <p>PHARMACEUTICALS: Pharmaceuticals are stored and maintained by the pharmacy at Carle Hospital. Inventory and stock rotation are performed quarterly.</p>
2.1.1.5	1. Grantee will develop and annually review and update a radio communication plan in cooperation with the Department's Radio Coordinator and the State Interoperable Executive	<p>1. Status: Met</p> <p>RADIO COMMS PLAN: IMERT's Planning and Logistics officer, in conjunction with the Department's Radio Coordinator and the State Interoperable Executive Committee, have already developed the radio communication plan. The plan was reviewed in June at the Department's IPHA Conference.</p>

	<p>Committee in compliance with the Statewide Communication Interoperability plan.</p> <p>2. Grantee will arrange access to, or procure as necessary the technology needed to ensure interoperable radio communications with emergency responders within the State.</p>	<p>2. Status: Met</p> <p>EQUIPMENT: During previous grant cycles, IMERT obtained the equipment necessary to ensure interoperable radio communication. This equipment will continue to be maintained for interoperable communication throughout the grant year.</p>
2.1.1.6	<p>The Grantee will develop and maintain all other necessary resources and infrastructure to maintain readiness to provide timely, appropriate mobile medical assets and personnel for response to public health emergencies, mass casualty events and other medical response and training missions; and as necessary to support the future development and operations of the IMERT Program.</p>	<p>Status: Met</p> <p>Mobile response capability is intact.</p> <p>An emergency notification communications drill was conducted on 10/16/2014 and 5/13/2015 utilizing IMERT and SIREN's notification capabilities.</p>
2.1.2	<p>Recruit medical and support staff and volunteers and develop response readiness through assessment, training and participation in exercises.</p>	<p>Status: Met</p> <p>IMERT participated in the following activities to fulfill this deliverable this cycle. Additionally 21 new members underwent the credentialing process and completed the application materials.</p> <ul style="list-style-type: none"> • 7/9/14 IMERT Recruitment Booth IPHA Summit, Schaumburg, IL • 7/10/14 Community Outreach Presentation on CBRNE Stroger Hospital, Chicago • 7/11/14 Community Outreach Presentation on CBRNE Stroger Hospital, Chicago • 7/15-17/14 RAFT Logistics Exercise Milan, IL • 8/14/14 ICOVA conference Chicago, IL • 8/26-28/2014 RAFT Exercise Quad Cities, IL • 9/2-4/2014 IEMA Conference Springfield, IL • 9/3/14 IMERT Booth IEMA Conference, Springfield, IL • 9/19/14 Region 7 Conference Region 7, Tinley Park, IL

		<ul style="list-style-type: none"> • 9/20/14 Franklin County Exercise Benton, IL • 9/25/14 Community Outreach, Illinois Primary Health Care Association • 10/16/2014 IMERT Team Communications Exercise • 10/17-19/2014 Massac County Interagency Exercise, Metropolis, IL • 10/18/14 CERT PSCC Training, College of DuPage • 11/3/2014 Collaborative Ebola Plan Assessment Team Exercise, Southern Illinois Health System: Memorial Hospital in Carbondale, IL • 11/3/2014 Collaborative Ebola Plan Assessment Team Exercise, Herrin Hospital in Herrin, IL • 11/4/2014 Collaborative Ebola Plan Assessment Team Exercise, St Joseph Hospital in Murphysboro • 11/12/2014 Collaborative Ebola Plan Assessment Team Exercise, Sarah Bush Hospital, Effingham, IL • 11/14/2014 Community Outreach Training on ICS provided at Stroger Hospital, South Shore, Kindred, Chicago, IL • 11/18/14 RAFT Exercise, Braidwood, IL • 12/6/14 IMERT SimTraining, Stroger Hospital, Chicago, IL • 12/16/14 SWMD Training, Jacksonville, IL • 1/10-12/15 Inauguration Deployment, Springfield, IL • 1/12/15 Hospital Communication Drill, St. Johns Hospital and Springfield Memorial • 1/12-13/15 IMERT Booth, Recruitment Event, School Nurse Days, Arlington, IL • 1/22/15 ICS Training, Stroger Hospital, Chicago, IL • 1/23/15 Emergency Preparedness & JumpStart Triage presentation, Chicago, IL • 1/30/2015 DOC: Moulage Techniques, Highland Park Hospital, Highland Park, IL • 1/31/2015 DOC: Moulage Techniques, Highland Park Hospital, Highland Park, IL • 2/27/15 DOC: Enhancing Responder Resiliency, Condell Hospital, Libertyville, IL • 2/28/15 DOC: Enhancing Responder Resiliency, Condell Hospital, Libertyville, IL • 3/27/15 DOC: Moulage Techniques, Carterville, IL • 4/4/15 IMERT SimTraining, Chicago, IL • 4/8/15 HICS Training for Healthcare Providers, Chicago, IL • 4/16/15 IMERT Recruitment Booth, Lisle, IL • 4/22/15 Active Shooter Drill, Springfield, IL • 4/25/15 DOC: Pediatric Needs During Disaster, Rockford, IL • 4/25/15 IMERT Recruitment Booth, Springfield, IL
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		<ul style="list-style-type: none"> • 4/30/15 IMERT Recruitment Booth, Springfield, IL • 5/2/15 Gurnee FD Active Shooter Drill, Gurnee, IL • 5/13/15 IMERT Communications Exercise, Statewide, IL • 5/15/15 SWMD Tabletop Exercise, Springfield, IL • 5/20/15 IMERT Recruitment Booth, Chicago, IL • 5/22/15 HICS Training for Healthcare Providers, Chicago, IL • 5/29/15 DOC: Haiti Earthquake Response, Oak Lawn, IL • 6/11/15 CDPH Full Scale Exercise, Chicago, IL • 6/15/15 IDPH TEPW Workshop, Schaumburg, IL • 6/16/15 RAFT Exercise, Morris, IL • 6/26/15 DOC: Logistics Operations, Urbana, IL
2.1.2.1	Grantee will promote recruitment through the use of marketing materials, a website, training activities, and other methods	<p>Status: Met and ongoing</p> <p>MARKETING MATERIALS: IMERT has developed brochures and informational fliers to promote the program at recruitment events</p> <p>WEBSITE: IMERT staff maintains the domain www.imert.org and www.inventrn.org to promote the program. Facebook, Twitter, and Pinterest accounts for IMERT are also maintained.</p> <p>RECRUITMENT EVENTS and OUTREACH ACTIVITIES: This quarter, IMERT has participated in the following events to recruit volunteers:</p> <ul style="list-style-type: none"> • 7/9/14 IMERT Booth IPHA Summit, Schaumburg, IL • 7/10/14 Community Outreach Presentation on CBRNE Stroger Hospital, Chicago • 7/11/14 Community Outreach Presentation on CBRNE Stroger Hospital, Chicago • 9/3/14 IMERT Booth IEMA Conference, Springfield, IL • 9/25/14 Community Outreach Illinois Primary Health Care Association • 11/14/2014 Community Outreach Training on ICS provided at Stroger Hospital, South Shore, Kindred, Chicago, IL • 1/12-13/15 IMERT Booth, Recruitment Event at School Nurse Days, Arlington, IL. 300 nurses in attendance • 1/20/2015 Presentation on the IMERT program was given to IEMA regional coordinators • 1/22/15 Community Outreach presentation on ICS at Stroger Hospital, Chicago, IL to 8 individuals • 1/23/15 Community Outreach presentation on Emergency Preparedness & JumpStart Triage at Stroger Hospital, Chicago, IL to 7 individuals

		<ul style="list-style-type: none"> 3/12/15 Community Outreach presentation for Elected Officials conference for IEMA Region 7. 4/17-18/15 IMERT Booth, Recruitment Event at the ENA Spring Symposium, Lisle, IL 4/25/2015 IMERT Booth, Recruitment Event at the ILEAS Conference, Springfield, IL 4/30/15 IMERT Booth, Recruitment Event at the IESMA Conference, Springfield, IL 5/20/15 IMERT Booth, Recruitment Event at the CFD EMS Day, Chicago, IL
2.1.2.2	<p>1. Grantee will monitor current and new staff and volunteers to determine NIMS and HSEEP training requirements are met based on current Department interpretation of federal and Illinois Emergency Management Agency (IEMA) guidance.</p> <p>2. The Grantee will maintain a current training plan and training records that will reported in the final annual report to the Department to verify the Grantees NIMS compliance as required by federal funding sources and the Governor's Executive Order.</p>	<p>1. Status: Met All contracted staff completed NIMS training including ICS 100, 200, 700, 703, 800, 808. IMERT's primary staff members have also completed ICS 702 and 704 as well as ICS 300 and 400 Command courses. All training coordinators have completed HSEEP and follow HSEEP guidelines when conducting presentations and training exercises. 4 of IMERT's staff attended the updated HSEEP course on 4/1/15 and 4/8/15. Per IMERT's agreement with IEMA and as mandated by federal guidelines, all team members have completed the basic NIMS requirements of ICS 100, 200, and 700 before joining, and complete a WMD training and face-to-face deployment course before qualifying for deployment.</p> <p>2. Status: Met Record of team member's training history are maintained in individual files at ILEAS and in a credentialing database that is maintained daily by IMERT staff. These records are available for audit at any time.</p>
2.1.2.3	<p>1. The Grantee will assure that all staff receives initial orientation training immediately after joining IMERT; and at least annual IMERT operational or capability training and/or exercise, one of which is face-to-face at least every two years – and reimburse its volunteers for travel expenses.</p>	<p>1. Status: Met Team members are able to take an IMERT orientation course online upon joining IMERT. IMERT developed a schedule of monthly Deployment Operations Course (DOC) face-to-face trainings on rotating topics, which were held across the State of Illinois. Volunteers were able to attend trainings on moulage, disaster logistics and communications, international aid response, and more.</p> <ul style="list-style-type: none"> 1/30/2015 DOC: Moulage Techniques, Highland Park, IL 1/31/2015 DOC: Moulage Techniques, Highland Park, IL 2/27/15 DOC: Enhancing Responder Resiliency, Libertyville, IL

	<p>2. For Grantee-sponsored exercises, the Grantee will submit an HSEEP-formatted after action report and improvement plan (AAR/IP) to the Department within 60 days following the completion of each exercise.</p>	<ul style="list-style-type: none"> • 2/28/15 DOC: Enhancing Responder Resiliency, Libertyville, IL • 3/27/15 DOC: Moulage Techniques, Carterville, IL • 4/4/15 IMERT SimTraining, Chicago, IL • 4/25/15 DOC: Pediatric Needs During Disaster, Rockford, IL • 5/29/15 DOC: Haiti Earthquake Response, Oak Lawn, IL • 6/26/15 DOC: Logistics Operations, Urbana, IL <p>2. Status: Met</p> <ul style="list-style-type: none"> • 7/15-17/2014 RAFT Logistics Exercise. AAR completed by IEMA RAFT • 8/26-28/2014 RAFT Exercise, AAR completed by IEMA RAFT • 9/20/2014 Franklin County Mass Casualty Exercise, AAR completed by Franklin C EMA • 10/16/2014 IMERT Team Communications Exercise, AAR completed by IMERT • 10/17-19/2014 Massac County Interagency Exercise, AAR completed by sponsoring agency • 10/18/14 CERT PSCC Training, AAR completed by CERT • 11/3/2014 Collaborative Ebola Plan Assessment Exercise, AAR completed by hospital • 11/3/2014 Collaborative Ebola Plan Assessment Exercise, AAR completed by hospital • 11/4/2014 Collaborative Ebola Plan Assessment Exercise, AAR completed by hospital • 11/12/2014 Collaborative Ebola Plan Assessment Exercise, AAR completed by hospital • 11/18/14 RAFT Exercise, AAR completed by IEMA RAFT • 12/16/14 SWMD Training, AAR completed by ISP • 1/10-12/15 Inauguration, Springfield, IL (real-time training with SWMD) • 1/12/15 Hospital Radio Test, St. Johns Hospital and Springfield Memorial Hospital • 4/22/15 Active Shooter Drill, Springfield, IL. AAR completed by IL National Guard • 5/2/15 Gurnee FD Active Shooter Drill, Gurnee, IL. AAR completed by Gurnee FD • 5/13/15 IMERT Communications Exercise, Statewide, IL. AAR completed by IMERT • 5/15/15 SWMD Tabletop Exercise, Springfield, IL. AAR completed ISP • 6/11/15 CDPH Full Scale Exercise, Chicago, IL. AAR completed by sponsoring agency • 6/15/15 IDPH TEPW Workshop, Schaumburg, IL. • 6/16/15 RAFT Exercise, Morris, IL. AAR completed by IEMA RAFT
2.1.3	Deploy to support the State's health and medical response mission when	<p>Status: Met</p> <ul style="list-style-type: none"> • No emergency deployments requested

	requested for disasters emergencies, trainings, and support missions.	
2.1.3.1	<p>1. The Grantee will ensure that, within 24 hours of an authorized State of Illinois request, the Grantee can alert, assemble and deploy in Illinois a completely self-reliant mobile Medical Needs Assessment Team of at least 4 appropriately trained medical and support staff and volunteers, equipment and supplies for at least 72 hours; or other medical response teams according to the times and criteria stated in the current ‘IMERT Response Packages’ document on file with the Department. The Grantee will assure that with appropriate logistical support arranged by the State of Illinois as described in the current “IMERT Response Packages” that these teams will be able to provide services for up to 2 weeks in Illinois or elsewhere as part of an EMAC response.</p>	<p>Status: Met</p> <p>IMERT’s staff and team members are ready for deployment within 24 hours of notification. The equipment cache can support a deployment of up to 72 hours. With additional support from the state interim medical services can be provided for up to 2 weeks</p>
2.1.3.2	<p>Grantee will only deploy on a State of Illinois sponsored mission after confirming an authorized State of Illinois request has been made for services. An authorized State of Illinois Request will contain the receipt of a permanently recorded mission number from the IEMA Communication Center.</p>	<p>Status: Met</p> <p>IMERT only deployed with the authorization of the State of Illinois and IEMA.</p> <ul style="list-style-type: none"> • Mission number: IL 2014-0416 for RAFT Exercise on 7/15/2014 • Mission number: IL 2014-0524 for RAFT Exercise on 8/27/2014 • Mission number: IL 2014-0573 for Franklin County Exercise on 9/20/2014 • Mission number: IL 2014 0638 for Massac Encampment on 10/15/14 • Mission number: IL 2014 0682 for the 3 Ebola Exercises on 11/3-4/14 • Mission number: IL 2014 0717 for the Ebola training on 11/12/2014 • Mission number: IL 2014-0727 for RAFT training on 11/18/14

		<ul style="list-style-type: none"> • Mission number: IL 2014-0779 for SWMD on 12/16/2014 • Mission number: IL 2015-0020 the Inauguration with SWMD on 1/10/15 • Mission number: IL 2015-0249 for a training in Carterville. • Mission number: IL 2015-0467 for deployment with the RAFT Team on 6/15/15 in Morris
2.1.3.3	<p>1. It is critical for the Grantee to ensure that the Department's Emergency Officer, Duty Officer, and IEMA's Communication Center can speak to an appropriate IMERT representative within 1 hour of an emergency notification.</p> <p>2. The Grantee will develop, continuously and immediately maintain the Department's IMERT Program deployment and demobilization protocols and emergency contact list/schedule.</p> <p>3. The emergency contact list must have the names of at least three persons designated in the order they should be contacted as primary, secondary and tertiary.</p> <p>4. Grantee will assure that these emergency points of contact have taken State of Illinois Rapid Electronic Notification (SIREN) Alerting System training and are able to use and continuously maintain their emergency contract information in SIREN.</p> <p>5. Contacts must have the knowledge, resources, ability, and authority to alert,</p>	<p>1. Status: Met IMERT's primary contact or designee is available, 24/7 within 1 hour of an emergency notification</p> <p>2. Status: Met IMERT's deployment and demobilization protocols are updated annually.</p> <p>3. Status: Met IMERT's contact list contains the names of 5 persons who are designated in the order they should be contacted as primary, secondary and tertiary.</p> <p>4. Status: Met All staff and emergency points of contact have taken SIREN training and have their information updated in SIREN</p> <p>5. Status: Met All contacts are able to deploy IMERT volunteers and resources in accordance with the IMERT chain of command.</p>

	<p>assemble, deploy, and demobilize the IMERT volunteers and assets.</p> <p>6. A copy of the contact list must be provided to the Department with the first quarterly report with updates provided to the Department's Duty Officer or designee as soon as possible when updated.</p>	<p>6. Status: Met</p> <p>A copy of the emergency contact list is attached to this report.</p>
2.1.3.4	<p>Grantee will properly demobilize equipment, staff and volunteers following deployment to ensure these resources are tracked and properly recovered to be available for redeployment.</p>	<p>Status: Met</p> <p>IMERT follows the deployment and demobilization protocols on file with the department to ensure proper demobilization occurs after each deployment and that assets are ready for re-deployment.</p>
2.1.4	<p>1. Support the Department's emergency public health and medical response plan development.</p>	<p>1. Status: Met and ongoing</p> <p>Participated in the IDPH-CDPH Crisis Standards of Care Workgroup</p> <ul style="list-style-type: none"> Meetings on 7/16/14, 8/21/2014, 9/18/2014, 10/16/14, 11/20/2014, 12/18/2014, 1/15/2015, 2/19/15, 3/23/2015, 4/9/15, 4/20/15, 5/21/15 <p>Participated in the IDPH Public Health & Medicine Committee</p> <ul style="list-style-type: none"> Meetings on 7/15/14, 9/17/14, 12/4/14, 3/18/15 <p>Participated in the RHCC Meetings</p> <ul style="list-style-type: none"> Meetings on 7/10/14, 9/18/14, 10/30/2014, 12/18/2014, 6/18/15 <p>Pediatric Preparedness Workgroup</p> <ul style="list-style-type: none"> 10/24/2014, 12/12/2014, 2/13/15 <p>HPP Work Plan Development</p> <ul style="list-style-type: none"> 2/10/15

	<p>2. The Grantee will provide volunteer management technical planning assistance to the Department's emergency public health and medical response planners, collaborating with the Department and others as requested and resources permit.</p>	<p>2. Status: Met</p> <p>IHELPS</p> <p>Worked with IDPH's Volunteer Coordinator to refine messaging, manage volunteers in database and promote volunteerism in the state by helping volunteers find the right volunteer opportunity. Individuals who click on the IMERT tab are contacted by our administrator to explain that we require a separate application. We then follow-up in 60 days, if they have not completed an IMERT application the information is noted in IHELPS so the volunteer coordinator can reach out to them with other options.</p> <ul style="list-style-type: none"> • Meetings on 7/23/14, 8/7/14, 8/8/14 • IMERT participated in the Department's committees and efforts as requested this year. IMERT staff conducted a presentation of the IMERT program and capabilities to IDPH, CDC, and ASPR personnel on 8/19/14. • IMERT was also involved in Ebola planning for statewide preparedness and formation of IMERT's Collaborative Ebola Assessment Plan Team. This resulted in 4 hospital conducted exercises in Southern Illinois in October. • IMERT participated in meetings discussing healthcare system Ebola status assessment. • Requested by IDPH to assist with the development of a Concept of Operations for the recently received items from the CDC medical station inventory.
	<p>Additional IMERT projects this grant year</p>	<ul style="list-style-type: none"> • IMERT participated in ITTF meetings on the following occasions: <ul style="list-style-type: none"> ○ Training Committee: 9/16/2014 ○ ITTF meeting: 9/24/2014, 12/10/2014, 1/28/15, 3/25/15, 4/9/15, 5/6/2015 • IMERT and IMT MOU. The IL-Incident Management Team and IMERT maintain a partnership agreement. • SimLearning for Response Teams: Dr. Lee continues to develop a SimLearning training program for disaster programs in cooperation with Stroger Hospital. Evaluation and training sessions were held on 12/6/14 and 4/4/15 • IMERT participated in the Inauguration preparedness planning on 12/17/2014 and 1/5/15 and attended the event in January in collaboration with other agencies. • IMERT participated in the exercise planning for the Franklin County Exercise on 8/6/14, 8/11/14, 8/13/14, 9/4/14

		<ul style="list-style-type: none"> • IMERT collaborated with IEMA and CERT program leaders on a multi-team exercise on 10/18/2014 in DuPage County. IMERT provided moulage and evaluators. • IMERT collaborated with multiple agencies in Massac County on a training exercise in October. • IMERT participated in the Illinois National Guard Active Shooter Drill on 4/22-23/15 and provided moulage for the exercise. • IMERT presented a poster on its Moulage Team development at the IPHA Conference in Schaumburg entitled “Enhance Your Trainings and Bring your Exercises to Life” in June. • IMERT provided IDPH with capability information for the Great Lakes Healthcare Partnership • IMERT Moulage Team met on 3/18/15 and 3/30/15 to discuss upcoming events IMERT will be providing moulage services for. • IMERT Moulage Team collaborated with the Gurnee Fire Department to provide moulage at their training event on 5/2/15. • IMERT met with EMSC to work on the creation of a specialized pediatric medical response team on 12/29/2014 and 6/19/15. Additionally two staff members attended a Pediatric Disaster course on 5/7-8/15 in Urbana. • IMERT Mental Health Team: IMERT met with Kammie Juzwin, IMERT’s Mental Health Coordinator, on 1/26/15 to further development of IMERT’s mental health component • IMERT participated in the CDC DSLR PHEP/HPP Health Outcomes Project on 4/15/15. <p>Committees:</p> <ul style="list-style-type: none"> • CERT PSCC Planning Committee: 7/21/14, 7/29/14, 8/26/14, 9/30/14 • IMC Hepatitis C Collaboration: 9/12/14, 10/23/2014, 11/14/2014, 1/9/15, 2/13/15, 5/15/15 • Pediatric Preparedness Workgroup: 8/8/14 ,10/24/2014, 12/12/2014, 2/13/15
	SPECIAL PROJECT: Utilizing video conferencing to enhance situation awareness and medical capabilities.	<ul style="list-style-type: none"> • IMERT continues to develop and practice with Vidyo Technology for the purpose of being able to broadcast images to enhance situation awareness for emergency authorities/planners/managers. Additionally, we continue to practice broadcasting live patient assessments between physicians and our healthcare providers. We utilized this at the Franklin County Exercise. The technology was used to obtain pediatric physician consult remotely in collaboration with Emergency Medical Services for Children during the exercise in Metropolis in October. • Thanks to the Illinois Poison Control Center, IMERT obtained a secure server to allow for further development of IMERT’s telemedicine capabilities. IMERT was able to begin

		utilizing this technology this quarter and gave a capability demonstration to response partners on 6/17/15.
	Additional IMERT Team Member Development Activities	<ul style="list-style-type: none"> • Staff attended the IPHA Summit July 2014 and June 2015 • 2 IMERT staff attended the Illinois Conference on Volunteer Administration on 8/14/14 • IMERT staff attended the IEMA Conference on 9/2-4/14 • IMERT staff attended the Region 7 Conference on 9/19/14 • Crisis Standards of Care Training Webinar on Ethics, Director attended 9/26/14 • Drones and Emergency Response Course, McHenry County College attended by the Logistics and Planning officer on 10/27/14



Jonathon E. Monken, Director

January 16, 2015

Dr. Moses Lee, Medical Director
Illinois Medical Emergency Response Team (IMERT)
1701 E Main St
Urbana, IL 61802

Dear Dr. Lee,

The Illinois Emergency Management Agency (IEMA) hosted the 5th Annual 2014 Prairie State Community Emergency Response Team (CERT) Challenge on Saturday, October 18, 2014. The event is designed to test CERT Team skills in a day-long event designed to simulate real-life situations they may face that require the use of CERT training. The event was hosted at the College of DuPage Homeland Security Education Center in Glen Ellyn. This was our first year at this venue and it allowed us to provide 11 local volunteer CERT teams with the opportunity to participate.

The 2014 Prairie State CERT Challenge would not have been possible without the help of support partners, including your organization. As you may know, the event utilizes numerous volunteers to serve as evaluators, controllers, victims, and assistants. Without these volunteers and those organizations that have donated and loaned materials, this event would not continue to be the nationally-recognized premier event that it is today.

I would like to give special recognition to an important member of your organization, Sue Tysiak, who served on the event planning committee. Her tireless efforts and vast knowledge were key factors in ensuring a successful event.

We thank you and your staff for your continued support of the CERT Challenge.

Sincerely,



Jonathon Monken
Director

2200 S. Dirksen Parkway • Springfield, Illinois • 62703 • Telephone (217) 782-7860 • <http://www.iema.illinois.gov>*Printed by the authority of the State of Illinois on Recycled Paper*



Illinois Emergency Management Agency

James K. Joseph, Acting Director

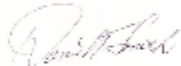
March 13, 2015

Mary Connelly RN BSN
Director IMERT
1701 E. Main Street
Urbana, Illinois 61802

Dear Mary:

I wish to extend my sincere thanks for your participation in yesterday's Elected Officials Workshop. While I realize the time allotted wasn't great all that attended appreciated the information and most stated they had questions to ask of the appropriate people to see if they were part of the organizations that presented. Again thanks for taking the time out of your busy schedule to make the Workshop a success.

Sincerely,



Daniel T Smith
Regional Coordinator



Region Seven Office

2125 South First Street, Suite 309 • Champaign, Illinois • 61820 • Telephone (618) 394-2233 • <http://www.iema.illinois.gov>

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IMERT

Communication Earthquake Response Availability Drill

October 16, 2014

EXECUTIVE SUMMARY

The Illinois Medical Emergency Response Team (IMERT) conducted an IMERT Communication Earthquake Availability Drill on October 16, 2014. The primary objective of the exercise was to test the ability to notify team members of a potential deployment in response to a hypothetical earthquake request and gauge response in real time. The scenario was in concert with the 2014 Great Central U.S. Shake Out.

Based on the exercise planning team's deliberations, the following objectives were developed for IMERT Communication Earthquake Availability Drill:

- Objective 1: Test IMERT's communication capabilities to all team members
- Objective 2: Determine IMERT's real-time deployment availability
- Objective 3: Test IMERT system ability to send and receive wireless text and e-mail messages,
- Objective 4: To evaluate the use of the State of Illinois Rapid Electronic Notification Service (SIREN) and the IMERT e-mail system for deployment requests

The purpose of this report is to analyze exercise results, identify strengths to be maintained and built upon, identify potential areas for further improvement, and support development of corrective actions.

Major Strengths

The major strengths identified during this exercise are as follows:

- Involvement of all deployable team members
- 507 team members contacted
- 231 team members responded within the specified time

Primary Areas for Improvement

Throughout the drill, opportunities for improvement in Illinois Medical Emergency Response Team's ability to respond to the incident were identified. The primary areas for improvement, including recommendations, are as follows:

- Team member files need to be kept current so IMERT can notify them of deployment.
- Contact one team members whose wireless message was bounced back
- Re-enforce to team members that deployment messages will come via text and email.

This exercise met the following objectives:

- All team members with a valid wireless and /or email address were contacted during the exercise via their contact information.
- A short concise wireless message was sent to team members through IDPH's SIREN Alert Network requesting that team members complete the exercise
- A separate e-mail message was sent to team members requesting a response by e-mail
- Tested administrative staff's ability to send wireless text message and e-mail to multiple team members, to accept multiple simultaneous phone calls, and to process responses.
- Tracked responses of those who could actually deploy.

IMERT
Communication Tornado Availability Drill
May 13, 2015

EXECUTIVE SUMMARY

The Illinois Medical Emergency Response Team (IMERT) conducted an IMERT Communication Tornado Availability Drill on May 13, 2015. The primary objective of the exercise was to test the ability to notify team members of a potential deployment in response to a hypothetical tornado request and gauge response in real time.

Based on the exercise planning team's deliberations, the following objectives were developed for IMERT Communication Tornado Availability Drill:

- Objective 1: Test IMERT's communication capabilities to all team members
- Objective 2: Determine IMERT's real-time deployment availability
- Objective 3: Test IMERT system ability to send and receive wireless text and e-mail messages,
- Objective 4: To evaluate the use of the State of Illinois Rapid Electronic Notification Service (SIREN) and the IMERT e-mail system for deployment requests

The purpose of this report is to analyze exercise results, identify strengths to be maintained and built upon, identify potential areas for further improvement, and support development of corrective actions.

Major Strengths

The major strengths identified during this exercise are as follows:

- Involvement of all deployable team members
- 320 team members contacted
- 228 team members responded within the specified time

Primary Areas for Improvement

Throughout the drill, opportunities for improvement in Illinois Medical Emergency Response Team's ability to respond to the incident were identified. The primary areas for improvement, including recommendations, are as follows:

- Team member files need to be kept current so IMERT can notify them of deployment.
- Contact two team members whose wireless message was bounced back
- Re-enforce to team members that deployment messages will come via text and email.
- To improve communication on the exact wireless message to be sent by IDPH's SIREN Alert Network

This exercise met the following objectives:

- All team members with a valid wireless and /or email address were contacted during the exercise via their contact information.
- A wireless message was sent to team members through IDPH's SIREN Alert Network
- A separate e-mail message was sent to team members requesting a response by e-mail
- Tested administrative staff's ability to send wireless text message and e-mail to multiple team members, to accept multiple simultaneous phone calls, and to process responses.
- Tracked responses of those who could actually deploy.